

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09737392</u>	Prepared by <u>M. RUSTIA</u>	Tracking Number <u>05762446</u>	
Examiner-GAU <u>LUCHESE-3764</u>	Date <u>5-9-3</u>	Week Date <u>4-28-3</u>	
	No. of queries <u>1</u>	<u>Reuse</u>	

SPECIFICATION	MESSAGE
a. Page Missing	
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
CLAIMS	
a. Claim(s) Missing	
<input checked="" type="radio"/> b. Improper Dependency	
c. Duplicate Numbers	
d. Incorrect Numbering	
e. Index Disagrees	
f. Punctuation	
g. Amendments	
h. Bracketing	
i. Missing Text	
j. Duplicate Text	
k. Other	

MESSAGE

*Claims 5, 2 and 3 now
claims 4, 1 and 2 respectively
depends upon cancelled claim 1.*

Please correct claim dependency.

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Patenting Division
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Thank you,
initials *LR*

RESPONSE *Corrected*

-dsf

initials